

NOTIFICATION OF MULTICANDIDATE STATUS

(See reverse side for instructions)

This form should be filed after the Committee qualifies as a multicandidate committee.

1. (a) NAME OF COMMITTEE IN FULL American Freedom PAC		2. FEC IDENTIFICATION NUMBER C00524033
(b) Number and Street Address PO Box 2082		
(c) City, State and ZIP Code Hutchinson KS 67504		3. TYPE OF COMMITTEE (check one) <input type="checkbox"/> STATE PARTY <input checked="" type="checkbox"/> OTHER

I certify that **one** of the following situations is correct (complete line 4 *or* 5):

- 4. STATUS BY AFFILIATION:** The committee submitted its Statement of Organization (FEC FORM 1) on _____ and simultaneously qualified as a multicandidate committee through its affiliation with:

Committee Name: _____

FEC Identification Number: _____.

5. STATUS BY QUALIFICATION:

- (a) Candidates:** The committee has made contributions to the five (5) federal candidates listed below (ONLY State party committees may leave this blank.):

	Name	Office Sought	State/District	Date
(i)	ANN MARIE BUERKLE	House	NY 25	10/11/2012
(ii)	STEVE MR. KING	House	IA 04	10/11/2012
(iii)	WILLIAM STEVE II SOUTHERLAND	House	FL 02	10/11/2012
(iv)	KEITH MR. ROTHFUS	House	PA 12	10/11/2012
(v)	JOE WALSH	House	IL 08	08/01/2012

- (b) Contributors:** The committee received a contribution from its 51st contributor on: 09/07/2012.

- (c) Registration:** The committee has been registered for at least 6 months. FEC FORM 1 was submitted on: 06/25/2012.

- (d) Qualification:** The committee met the above requirements on: 12/25/2012.

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

TYPE OR PRINT NAME OF TREASURER Michael Jackson	SIGNATURE OF TREASURER <i>Michael Jackson</i> [Electronically Filed]	DATE 12/28/2012
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.